



Neonatal Lupus in a Preterm Newborn Girl

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Received: 27 November 2021 / Accepted: 26 April 2022 / Published online: 27 June 2022
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A newborn was born with a birth weight of 1080 g at a gestation of 34 wk to a 26-y-old primigravida woman. The baby was noticed to have erythema over perioral and periocular regions with a faint annular erythematous rash over face and abdomen on the day of birth (Fig. 1a, b). The rashes increased in intensity of distribution similar to ‘butterfly rashes’ of lupus erythematosus leaving behind hypopigmentation (Fig. 1c, d).

Rest of the physical examination including fundus examination was normal. Investigations revealed normal blood counts, liver, and renal function tests. Serologies for toxoplasmosis, syphilis, cytomegalovirus, herpes simplex, and bacterial and fungal cultures (including maternal genital swabs) were noncontributory. Echocardiographic examination was normal. A diagnosis of neonatal lupus was made on the basis of positive anti-SSA/Ro and anti-SSB/La antibodies in both mother and the newborn.

The skin manifestations of neonatal lupus evolve after a few weeks of birth; however, an earlier presentation is reported [1]. The progression of rashes in the present case is likely because of the advancing skin maturity and ambient light/heat exposure in the intensive care [2, 3]. Due to the transient nature of the skin rashes, the skin biopsy was deferred. The infant was seen to be healthy at 3 mo of age with decreased dermatological findings.



Fig. 1 a, b Dermatological findings noted within a few hours of birth in a small-for-date premature newborn. Protective skin adhesive applied over the philtrum. c, d Skin manifestation of neonatal lupus after 3 wk of birth

Declarations

Consent for Publication Written informed consent was obtained from the parent of the patient for publication of clinical details and clinical images.

Conflict of Interest None.

References

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